

**IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF MASSACHUSETTS**

FILED  
CLERK'S OFFICE  
2005 APR 25 PM 1:44  
U.S. DISTRICT COURT  
DISTRICT OF MASS.

Cause No: 05 – 10125 RCL

Margaret Cimini, )  
 ) A Petition for Contempt against  
Plaintiff (Respondent below), ) the Massachusetts Department of  
 ) Revenue, Marilyn Ray Smith, and National  
 ) Financial Services, LLC a Fidelity Investment  
 ) Company  
 )  
v. )  
 )  
Mark Cimini, ) State court cause no.: 97D-4115-DV1  
 )  
Defendant (Petitioner below), )  
 )  
and, in re: the support and welfare )  
of Jonathan Cimini. ) Honorable Judge

**ALLEGATIONS**

- 1) The Massachusetts Department of Revenue, as well as the Middlesex County Probate and Family Courts, has been informed of the removal to this court of the Probate and Family Court case entitled 97D-4115-DV1.
- 2) This removal case includes the procedural violations of the defendant's Constitutional. and Common Law rights to include unresolved motions entered in Middlesex Probate and Family Court in April of 2004 to modify custody and child support.
- 3) The Massachusetts Department of Revenue, specifically Marilyn Ray Smith both in her role as Deputy Commissioner of Child Support and in her personal capacity, has attempted to levy several accounts of the defendant during this time. These levys are provided as attachments.
- 4) Procedural Due Process is violated when a citizen is not given the opportunity to be heard (see Goldberg v. Kelly, US Supreme Court, 1970).
- 5) None of the levys have been the subject of a court hearing, a court order, or have a judge's signature, a violation of the Federally protected right of Due Process and is further evidence of conversion within the Commonwealth.

- 6) The Massachusetts Department of Revenue has also modified the amount of child support withheld from the defendant's paycheck since the removal of this matter to Federal District Court without a court hearing, another violation of the Federally protected right of Due Process.
- 7) These levys have included bank accounts which are the only source of support for the defendant and for his wife and their minor child. Given that wages are largely direct deposit these levies against bank account are a violation of 15 USC 1673 "Restriction on garnishment". Furthermore the bank accounts are used by the defendant's company to reimburse the defendant for legitimate business expenses. Hence, the Commonwealth is therefore attempting to leave the defendant without sufficient means to a live and is furthermore attempting to take money not part of the defendant's income.
- 8) The aggressive and illegal levies are done to enrich the Commonwealth (as discussed in my original pleadings to this court) and encroach on this court's jurisdiction.
- 9) National Financial Services, LLC, failed to provide any return contact information in their letter notifying me of the levy (see attachments) and has been notified by email that this levy is illegal. No response has come from them Thus they and the Massachusetts Department of Revenue are engaged in a conspiracy to both deny the Defendant of the Federally protected right of Due Process and Federally prohibited activity of unlawful taking of property. Both of these acts are done under color of law, color of authority to enrich the Commonwealth.
- 10) This continuing harassment and illegal acts by the Commonwealth are causing the defendant and his family financial and emotional distress.

#### NOTICE TO PARTIES

- 10) Defendant now and hereby provide his formal Notice of the above to all interested parties, of record.

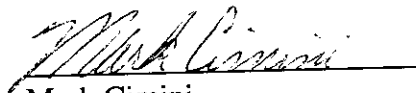
#### SUMMARY AND PRAYER

- 11) That this Court order the Massachusetts Department of Revenue and Marilyn Ray Smith, in both her personal and professional capacity, to cease and desist in all illegal actions to include any further levies.

- 12) That this Court find that the Massachusetts Department of Revenue and Marilyn Ray Smith, in both her personal and professional capacity, have unlawfully encroached on this Court's jurisdiction.
- 13) That this Court find that the Massachusetts Department of Revenue and Marilyn Ray Smith, in both her personal and professional capacity, have entered into conversion and have failed to provide the defendant with Federally guaranteed Due Process, under color of law, color of authority.
- 14) That this Court the action of the Massachusetts Department of Revenue, Marilyn Ray Smith, and National Financial Services, LLC constitutes unlawful taking of property, prohibited by the Federal Constitution, under color of law, color of authority.
- 15) That this Court consider financial sanctions and damages against the Massachusetts Department of Revenue, Marilyn Ray Smith, and National Financial Services, LLC as a result of these illegal acts.
- 16) The Defendant requests that the Massachusetts Department of Revenue and Marilyn Ray Smith, in both her personal and professional capacity, and National Financial Services, LLC, be required to appear before this Court to show cause why they should not be adjudged in contempt of Court and for such other relief as to said Court may seem just. Defendant also prays for an award of costs, including attorney's fees and interest.

WHEREFORE, the undersigned Defendant, Mark Cimini, now pray for acceptance of this motion into the record, and under, the jurisdiction of this United States District Court, with all speed, and for all other relief deemed just and proper in the premises.


Respectfully submitted,

  
Mark Cimini

VERIFICATION

I hereby declare, verify, certify and state, pursuant to the penalties of perjury under the laws of the United States, and by the provisions of 28 USC § 1746, that all of the above and foregoing representations are true and correct to the best of my knowledge, information, and belief.

Executed at Westford, MA, this 22<sup>nd</sup> day of April, 2005.

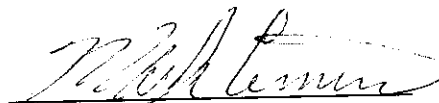
  
Mark Cimini

CERTIFICATE OF SERVICE

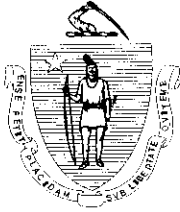
I hereby certify that, on this 22<sup>nd</sup> day of April, 2005, a true and complete copy of the foregoing petition for contempt, by depositing the same in the United States mail, postage prepaid, has been duly served upon all parties of record in the lower state proceedings, to-wit:

Margaret Cimini 5 Sand Beach Road Westford, MA 01886	Marilyn Ray Smith (2 copies) Deputy Commissioner of Child Support P.O. Box 55149 Boston, MA 02205-5149
Norman R. Malo National Financial Services LLC 82 Devonshire Street Boston, MA 02109	

and, that the same is being also filed this same date within the lower state trial court proceedings.

  
Mark Cimini

Mark Cimini  
12 Maple Road  
Westford, MA 01886  
(978) 692-4556  
m.cimini@att.net



Alan LeBovidge  
Commissioner

Marilyn Ray Smith  
Deputy Commissioner

*The Commonwealth of Massachusetts*  
*Department of Revenue*  
*Child Support Enforcement Division*  
*P.O. Box 9561*  
*Boston, MA 02114-9561*

April 1, 2005

Mr. Mark Cimini  
12 Maple Road  
Westford, MA 01886

Dear Mr. Cimini:

We received your check for copies of the Interdepartmental Service Agreements between the Massachusetts Department of Revenue's Child Support Enforcement Division (CSE) and the Probate and Family Court for state fiscal years 2001, 2002, 2003, 2004, and 2005. Enclosed please find copies of these agreements.

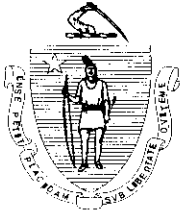
Thank you.

Sincerely,

*Marilynn Sager/CJZ*

Marilynn Sager  
Senior Counsel and Disclosure Officer

Encls.



Alan LeBovidge  
Commissioner

Marilyn Ray Smith  
Deputy Commissioner

*The Commonwealth of Massachusetts*  
*Department of Revenue*  
*Child Support Enforcement Division*  
*P.O. Box 9561*  
*Boston, MA 02114-9561*

March 15, 2005

Mr. Mark Cimini  
12 Maple Road  
Westford, MA 01886

Dear Mr. Cimini:

I am writing to give you an estimate of the cost of copying the records that you requested in your letter of January 21, 2005 to Commissioner Alan LeBovidge. You requested copies of the Interdepartmental Service Agreements between the Massachusetts Department of Revenue's Child Support Enforcement Division (CSE) and the Probate and Family Court that were signed on or about July 13, 2000 through the present.

We have reviewed our records and have Interdepartmental Service Agreements between CSE and the Probate and Family Court for five years, including those for state fiscal years 2001, 2002, 2003, 2004, and 2005. Each agreement is approximately 79 pages, including all attachments, for an approximate total of 395 pages. In accordance with 950 CMR 32.06, which regulates the fees for copies of public records, CSE charges \$0.20 per page. The total cost therefore would be 395 times \$0.20, or \$79.00.

If you would like copies of the documents that you requested, please send to my attention at the address above a check made payable to the Commonwealth of Massachusetts for \$79.00. We will not process your request until we receive pre-payment of the costs.

Sincerely,

A handwritten signature in cursive script that reads "Marilynn Sager/CJZ".

Marilynn Sager  
Senior Counsel and Disclosure Officer



***The Commonwealth of Massachusetts***  
***Department of Revenue***  
***Child Support Enforcement Division***

ALAN LEBOVIDGE  
COMMISSIONER  
MARILYN RAY SMITH  
DEPUTY COMMISSIONER

03/27/2005

MARK K. CIMINI  
12 MAPLE ROAD  
WESTFORD, MA 01886-1631

PIN: 00.2129.0173

Case #: 003.908.617

Dear MARK K. CIMINI:

The Child Support Enforcement Division of the Massachusetts Department of Revenue (DOR) is responsible for establishing and enforcing child support orders. Enclosed, please find copies of documents relating to your child support case. DOR is sending you copies of these documents for your records.

If you have any questions about the documents, please call our Customer Service Bureau at the number below.

Sincerely,

MASSACHUSETTS DEPARTMENT OF REVENUE  
CHILD SUPPORT ENFORCEMENT DIVISION

**DOR/CSE CUSTOMER SERVICE**  
**(800)332-2733**

CSO: 06



**The Commonwealth of Massachusetts**  
**Department of Revenue**  
**Child Support Enforcement Division**

ALAN LEBOVIDGE  
 COMMISSIONER  
 MARILYN RAY SMITH  
 DEPUTY COMMISSIONER

**NOTICE OF LEVY**

**RETURN WITH PAYMENT** Levy #: 05-17762  
 (Massachusetts General Laws, Chapter 119A, § 6)

NATIONAL FINANCIAL SERVICES LLC  
 82 DEVONSHIRE ST RISK OPERATIONS  
 MASSACHUSETTS, MA 02109-

**MULTI-STATE LEVY**

Individual's Name and Address  
 MARK K. CIMINI  
 12 MAPLE ROAD  
 WESTFORD, MA 01886-1631

PIN: 00.2129.0173  
 SSN: 010-54-1623

**ACCOUNT NUMBERS**

1. 347944904	5.	9.	Total Amount Due
2.	6.	10.	\$6,245.00
3.	7.	11.	
4.	8.	12.	

Chapter 119A, § 6 (b)(1) of the Massachusetts General Laws provides a lien for the above child support debts. Notice and demand have been made on the individual for the total amount due set forth above, but he or she has refused or neglected to pay. The amount is currently due, owing and unpaid.

You are hereby notified that all property or rights to property, monies and credits belonging to the individual whose name or SSN appears above, or for which you are obligated to the individual, and currently in your possession, is levied upon for payment of the child support debts. Demand is hereby made for the immediate payment of the amount set forth above, or for such lesser amount, from the property, monies and credits levied upon and currently in your possession associated with the individual or SSN. You are directed to immediately freeze such property, monies and credits. You may hold them for a period of up to 21 days after which you are directed to make payment to the Massachusetts Department of Revenue (DOR) at the address below (unless otherwise instructed by DOR). An organization that holds property with respect to a life insurance or endowment contract shall remit payment within 90 days of the date of the levy. G.L. c. 119A, § 6 (b)(6).

This levy will remain in effect for 60 days from the date of receipt or until the amount due is paid in full to DOR, whichever occurs first.

PLEASE NOTE: THIS LEVY ALSO ATTACHES TO ANY OTHER ACCOUNT HELD BY THE INDIVIDUAL IN YOUR INSTITUTION INCLUDING ANY INDIVIDUAL RETIREMENT ACCOUNT (IRA), RETIREMENT PLAN BENEFITING SELF-EMPLOYED INDIVIDUALS, OR ANY OTHER QUALIFIED PLAN IN YOUR POSSESSION OR CONTROL; OR ANY ASSET SUCH AS A LIFE INSURANCE OR ENDOWMENT CONTRACT.

Any person who fails or refuses to surrender property subject to this levy shall be liable to the Commonwealth in his own person in a sum equal to the value of the property not so surrendered, together with costs and interest up to the maximum annual rate established by G.L.c.62C, § 32. Failure or refusal to surrender such property without reasonable cause shall further subject such person to a penalty equal to 25% of the amount recoverable. G.L. c. 119A, §6 (b)(7).

MARILYN RAY SMITH DEPUTY COMMISSIONER OF CHILD SUPPORT Name and Title of Authorized DOR/CSE Staff	Signature 	03/27/2005 Date
---	---	--------------------

**PAYMENT OF LEVY**

Please complete this form and send it along with any payments resulting from this levy, to the address below. Make all payments to the Commonwealth of Massachusetts.

Individual's Name MARK K. CIMINI	SSN 010-54-1623	Amount \$
Signature	Bank	Date

**SEND TO:** DEPARTMENT OF REVENUE  
 PO BOX 55149  
 BOSTON, MA 02205-5149





***The Commonwealth of Massachusetts***  
***Department of Revenue***  
***Child Support Enforcement Division***

ALAN LEBOVIDGE  
COMMISSIONER  
MARILYN RAY SMITH  
DEPUTY COMMISSIONER

01/30/2005

MARK K. CIMINI  
12 MAPLE ROAD  
WESTFORD, MA 01886-1631

PIN: 00.2129.0173

Case #: 003.908.617

Dear MARK K. CIMINI:

The Child Support Enforcement Division of the Massachusetts Department of Revenue (DOR) is responsible for establishing and enforcing child support orders. Enclosed, please find copies of documents relating to your child support case. DOR is sending you copies of these documents for your records.

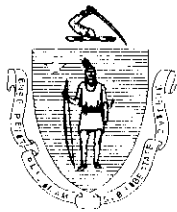
If you have any questions about the documents, please call our Customer Service Bureau at the number below.

Sincerely,

MASSACHUSETTS DEPARTMENT OF REVENUE  
CHILD SUPPORT ENFORCEMENT DIVISION

**DOR/CSE CUSTOMER SERVICE**  
**(800)332-2733**

CSO: 06



ALAN LEBOVIDGE  
COMMISSIONER  
MARILYN RAY SMITH  
DEPUTY COMMISSIONER

# The Commonwealth of Massachusetts

## Department of Revenue

### Child Support Enforcement Division

#### NOTICE OF LEVY

**RETURN WITH PAYMENT** Levy #: 05-7013

(Massachusetts General Laws, Chapter 119A, § 6)

IC FEDERAL CREDIT UNION  
300 BEMIS ROAD  
FITCHBURG, MA 01420-0000

**Individual's Name and Address**

MARK K. CIMINI  
12 MAPLE ROAD  
WESTFORD, MA 01886-1631

PIN: 00.2129.0173  
SSN: 010-54-1623

#### ACCOUNT NUMBERS

1. 706003980	5.	9.	Total Amount Due \$6,424.00
2.	6.	10.	
3.	7.	11.	
4.	8.	12.	

Chapter 119A, § 6 (b)(1) of the Massachusetts General Laws provides a lien for the above child support debts. Notice and demand have been made on the individual for the total amount due set forth above, but he or she has refused or neglected to pay. The amount is currently due, owing and unpaid.

You are hereby notified that all property or rights to property, monies and credits belonging to the individual whose name or SSN appears above, or for which you are obligated to that individual, and currently in your possession, is levied upon for payment of the child support debts. Demand is hereby made for the immediate payment of the amount set forth above, or for such lesser amount, from the property, monies and credits levied upon and currently in your possession associated with the individual or SSN. You are directed to immediately freeze such property, monies and credits. You may hold them for a period of up to 21 days after which you are directed to make payment to the Massachusetts Department of Revenue (DOR) at the address below (unless otherwise instructed by DOR). An organization that holds property with respect to a life insurance or endowment contract shall remit payment within 90 days of the date of the levy. G.L. c. 119A, § 6 (b)(6).

This levy will remain in effect for 60 days from the date of receipt or until the amount due is paid in full to DOR, whichever occurs first. Do not send a payment if the amount to be levied, minus the processing fee of \$20, is less than \$25.

PLEASE NOTE: THIS LEVY ALSO ATTACHES TO ANY OTHER ACCOUNT HELD BY THE INDIVIDUAL, OR UNDER THE SSN IDENTIFIED ABOVE, IN YOUR INSTITUTION INCLUDING ANY INDIVIDUAL RETIREMENT ACCOUNT (IRA), RETIREMENT PLAN BENEFITING SELF-EMPLOYED INDIVIDUALS, OR ANY OTHER QUALIFIED PLAN IN YOUR POSSESSION OR CONTROL; OR ANY ASSET SUCH AS A LIFE INSURANCE OR ENDOWMENT CONTRACT.

Any person who fails or refuses to surrender property subject to this levy shall be liable to the Commonwealth in his own person in a sum equal to the value of the property not so surrendered, together with costs and interest up to the maximum annual rate established by G.L. c. 62C, § 32. Failure or refusal to surrender such property without reasonable cause shall further subject such person to a penalty equal to 25% of the amount recoverable. G.L. c. 119A, § 6 (b)(7).

**NOTE: If the account is jointly held with any individuals whose names do not appear on the Notice of Levy, you must send copies of the Notice of Levy to those individuals immediately.**

MARILYN RAY SMITH DEPUTY COMMISSIONER OF CHILD SUPPORT Name and Title of Authorized DOR/CSE Staff	Signature 	01/30/2005 Date
---	---	--------------------

#### PAYMENT OF LEVY

Please complete this form and send it along with any payments resulting from this levy, to the address below. Make all payments to the Commonwealth of Massachusetts.

Obligor's Name MARK K. CIMINI	SSN 010-54-1623	Amount \$
Signature	Bank	Date

**SEND TO:** DEPARTMENT OF REVENUE  
PO BOX 55149  
BOSTON, MA 02205-5149

**MASSACHUSETTS DEPARTMENT OF REVENUE  
CHILD SUPPORT ENFORCEMENT DIVISION**

**BANK LEVY RESPONSE FORM**

**Your bank account has been levied by the Child Support Enforcement Division of the Department of Revenue (DOR) to collect past-due child support.** The levy requires your bank to take money from your account, up to the amount of past-due child support you owe, and send it to DOR. DOR is authorized to levy your account, even if your account is a joint account or if you have been making regular child support payments. An earlier notice and demand for payment were mailed to you. If you dispute DOR's action for any of the reasons listed below, please complete and return this form to request that DOR review your case.

***DOR cannot review your case or discuss the review over the telephone.*** Return this form to DOR at the address on the reverse side **within 15 days** from the date of the levy notice.

Please **DO NOT** contact DOR's DOR/CSE CUSTOMER SERVICE at (800)332-2733 to request a hardship review, **just complete and return the form below.**

NAME:

\_\_\_\_\_  
Last First MI

\_\_\_\_\_  
Social Security Number

ADDRESS:

\_\_\_\_\_  
Street

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
City/Town State Zip

\_\_\_\_\_  
Work Phone

**Please check the reasons that apply (you may check more than one):**

- ☐ The amount taken from my bank account was more than I owe. The correct amount of past-due support I owe is \$ \_\_\_\_\_. (Please provide any information that supports your claim, such as canceled checks, pay stubs, copy of a court judgment on past-due support, etc.)
- ☐ Some or all of the funds levied are exempt because they come from federal or state benefits, such as Supplemental Security Income (SSI); Transitional Assistance to Families with Dependent Children (TAFDC); Transitional Aid to Needy Families (TANF); or Emergency Aid for Elderly and Disabled Residents and Children (EAEDC). **(You must attach a copy of the official federal or state award letter.)**
- ☐ The funds taken should be exempt from levy because the funds do not belong to you or because of other reasons stated below. (For example, if you are the court appointed conservator or guardian for funds belonging to another individual. Joint account holders, like husband and wife, or child and parent, or parent and significant other, are *not* exempted under this section.) Explain your claim below. **You must provide your three most recent bank statements and all of the associated canceled checks, as well as identify the source of all deposits.** Please attach any additional paperwork you may have to show that the levied funds do not belong to you such as conservator papers or payroll stubs showing direct deposit.
- ☐ The levy of my account causes me a severe hardship for the reason stated below. (Please attach copies of the documents that support your claim such as an eviction notice, notice of foreclosure and/or utility shut off notices.)

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLEASE TURN PAGE**

CSO: 09

NATIONAL FINANCIAL

A Fidelity Investments Company

Investment  
Management  
BOSTON, MASSACHUSETTS  
02109-3614

## **IMPORTANT INFORMATION ABOUT YOUR ACCOUNT**

Please read the enclosed document that attaches assets owned by you. We have restricted sufficient assets in accordance with the requirements set forth in the document. During the timeframe described in the document you may contact the levying agency for clarification. You will not be able to exchange or redeem these assets during this period unless we are notified by the levying agency that your assets have been released. If we have not received a release from the levying agency at the expiration of this period, we will remove the restriction and turnover the assets.

April 11, 2005



**The Commonwealth of Massachusetts**  
**Department of Revenue**  
**Child Support Enforcement Division**

ALAN LEBOVIDGE  
 COMMISSIONER  
 MARILYN RAY SMITH  
 DEPUTY COMMISSIONER

**NOTICE OF LEVY**

**RETURN WITH PAYMENT** Levy #: 05-17762  
 (Massachusetts General Laws, Chapter 119A, § 6)

NATIONAL FINANCIAL SERVICES LLC  
 82 DEVONSHIRE ST RISK OPERATIONS  
 MASSACHUSETTS, MA 02109-

**MULTI-STATE LEVY**

Individual's Name and Address  
 MARK K. CIMINI  
 12 MAPLE ROAD  
 WESTFORD, MA 01886-1631

PIN: 00.2129.0173  
 SSN: 010-54-1623

**ACCOUNT NUMBERS**

1. 347944904	5.	9.	Total Amount Due
2.	6.	10.	\$6,245.00
3.	7.	11.	
4.	8.	12.	


Chapter 119A, § 6 (b)(1) of the Massachusetts General Laws provides a lien for the above child support debts. Notice and demand have been made on the individual for the total amount due set forth above, but he or she has refused or neglected to pay. The amount is currently due, owing and unpaid.

You are hereby notified that all property or rights to property, monies and credits belonging to the individual whose name or SSN appears above, or for which you are obligated to the individual, and currently in your possession, is levied upon for payment of the child support debts. Demand is hereby made for the immediate payment of the amount set forth above, or for such lesser amount, from the property, monies and credits levied upon and currently in your possession associated with the individual or SSN. You are directed to immediately freeze such property, monies and credits. You may hold them for a period of up to 21 days after which you are directed to make payment to the Massachusetts Department of Revenue (DOR) at the address below (unless otherwise instructed by DOR). An organization that holds property with respect to a life insurance or endowment contract shall remit payment within 90 days of the date of the levy. G.L. c. 119A, § 6 (b)(6).

This levy will remain in effect for 60 days from the date of receipt or until the amount due is paid in full to DOR, whichever occurs first.

PLEASE NOTE: THIS LEVY ALSO ATTACHES TO ANY OTHER ACCOUNT HELD BY THE INDIVIDUAL IN YOUR INSTITUTION INCLUDING ANY INDIVIDUAL RETIREMENT ACCOUNT (IRA), RETIREMENT PLAN BENEFITING SELF-EMPLOYED INDIVIDUALS, OR ANY OTHER QUALIFIED PLAN IN YOUR POSSESSION OR CONTROL; OR ANY ASSET SUCH AS A LIFE INSURANCE OR ENDOWMENT CONTRACT.

Any person who fails or refuses to surrender property subject to this levy shall be liable to the Commonwealth in his own person in a sum equal to the value of the property not so surrendered, together with costs and interest up to the maximum annual rate established by G.L.c.62C, § 32. Failure or refusal to surrender such property without reasonable cause shall further subject such person to a penalty equal to 25% of the amount recoverable. G.L. c. 119A, §6 (b)(7).

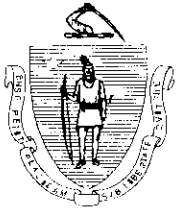
MARILYN RAY SMITH DEPUTY COMMISSIONER OF CHILD SUPPORT Name and Title of Authorized DOR/CSE Staff	Signature 	03/20/2005 Date
---	---	--------------------

**PAYMENT OF LEVY**

Please complete this form and send it along with any payments resulting from this levy, to the address below. Make all payments to the Commonwealth of Massachusetts.

Individual's Name MARK K. CIMINI	SSN 010-54-1623	Amount \$
Signature	Bank	Date

**SEND TO:** DEPARTMENT OF REVENUE  
 PO BOX 55149  
 BOSTON, MA 02205-5149



***The Commonwealth of Massachusetts***  
***Department of Revenue***  
***Child Support Enforcement Division***

ALAN LEBOVIDGE  
COMMISSIONER  
MARILYN RAY SMITH  
DEPUTY COMMISSIONER

02/13/2005

MARK K. CIMINI  
12 MAPLE ROAD  
WESTFORD, MA 01886-1631

PIN: 00.2129.0173

Case #: 003.908.617

Dear MARK K. CIMINI:

The Child Support Enforcement Division of the Massachusetts Department of Revenue (DOR) is responsible for establishing and enforcing child support orders. Enclosed, please find copies of documents relating to your child support case. DOR is sending you copies of these documents for your records.

If you have any questions about the documents, please call our Customer Service Bureau at the number below.

Sincerely,

MASSACHUSETTS DEPARTMENT OF REVENUE  
CHILD SUPPORT ENFORCEMENT DIVISION

**DOR/CSE CUSTOMER SERVICE**  
**(800)332-2733**

CSO: 06



**The Commonwealth of Massachusetts**  
**Department of Revenue**  
**Child Support Enforcement Division**

ALAN LEBOVIDGE  
 COMMISSIONER  
 MARILYN RAY SMITH  
 DEPUTY COMMISSIONER

**NOTICE OF LEVY**

**RETURN WITH PAYMENT** Levy #: 05-11393  
 (Massachusetts General Laws, Chapter 119A, § 6)

MILESTONE FEDERAL CREDIT UNION  
 8 NEW ENGLAND EXECUTIVE PARK  
 BURLINGTON, MA 01803-

**MULTI-STATE LEVY**

**Individual's Name and Address**

MARK K. CIMINI  
 12 MAPLE ROAD  
 WESTFORD, MA 01886-1631

PIN: 00.2129.0173  
 SSN: 010-54-1623

**ACCOUNT NUMBERS**

1. 15571110	5.	9.	Total Amount Due
2.	6.	10.	\$6,610.00
3.	7.	11.	
4.	8.	12.	

Chapter 119A, § 6 (b)(1) of the Massachusetts General Laws provides a lien for the above child support debts. Notice and demand have been made on the individual for the total amount due set forth above, but he or she has refused or neglected to pay. The amount is currently due, owing and unpaid.

You are hereby notified that all property or rights to property, monies and credits belonging to the individual whose name or SSN appears above, or for which you are obligated to the individual, and currently in your possession, is levied upon for payment of the child support debts. Demand is hereby made for the immediate payment of the amount set forth above, or for such lesser amount, from the property, monies and credits levied upon and currently in your possession associated with the individual or SSN. You are directed to immediately freeze such property, monies and credits. You may hold them for a period of up to 21 days after which you are directed to make payment to the Massachusetts Department of Revenue (DOR) at the address below (unless otherwise instructed by DOR). An organization that holds property with respect to a life insurance or endowment contract shall remit payment within 90 days of the date of the levy. G.L. c. 119A, § 6 (b)(6).

This levy will remain in effect for 60 days from the date of receipt or until the amount due is paid in full to DOR, whichever occurs first.

PLEASE NOTE: THIS LEVY ALSO ATTACHES TO ANY OTHER ACCOUNT HELD BY THE INDIVIDUAL IN YOUR INSTITUTION INCLUDING ANY INDIVIDUAL RETIREMENT ACCOUNT (IRA), RETIREMENT PLAN BENEFITING SELF-EMPLOYED INDIVIDUALS, OR ANY OTHER QUALIFIED PLAN IN YOUR POSSESSION OR CONTROL; OR ANY ASSET SUCH AS A LIFE INSURANCE OR ENDOWMENT CONTRACT.

Any person who fails or refuses to surrender property subject to this levy shall be liable to the Commonwealth in his own person in a sum equal to the value of the property not so surrendered, together with costs and interest up to the maximum annual rate established by G.L.c.62C, § 32. Failure or refusal to surrender such property without reasonable cause shall further subject such person to a penalty equal to 25% of the amount recoverable. G.L. c. 119A, §6 (b)(7).

MARILYN RAY SMITH DEPUTY COMMISSIONER OF CHILD SUPPORT Name and Title of Authorized DOR/CSE Staff	 Signature	02/13/2005 Date
---	---------------	--------------------

**PAYMENT OF LEVY**

Please complete this form and send it along with any payments resulting from this levy, to the address below. Make all payments to the Commonwealth of Massachusetts.

Individual's Name MARK K. CIMINI	SSN 010-54-1623	Amount \$
Signature	Bank	Date

**SEND TO:** DEPARTMENT OF REVENUE  
 PO BOX 55149  
 BOSTON, MA 02205-5149

**MASSACHUSETTS DEPARTMENT OF REVENUE  
CHILD SUPPORT ENFORCEMENT DIVISION**

**BANK LEVY RESPONSE FORM**

**Your bank account has been levied by the Child Support Enforcement Division of the Department of Revenue (DOR) to collect past-due child support.** The levy requires your bank to take money from your account, up to the amount of past-due child support you owe, and send it to DOR. DOR is authorized to levy your account, even if your account is a joint account or if you have been making regular child support payments. An earlier notice and demand for payment were mailed to you. If you dispute DOR's action for any of the reasons listed below, please complete and return this form to request that DOR review your case.

***DOR cannot review your case or discuss the review over the telephone.*** Return this form to DOR at the address on the reverse side **within 15 days** from the date of the levy notice.

Please **DO NOT** contact DOR's DOR/CSE CUSTOMER SERVICE at (800)332-2733 to request a hardship review, **just complete and return the form below.**

NAME:

Last	First	MI	Social Security Number
------	-------	----	------------------------

ADDRESS:

Street	Home Phone
--------	------------

City/Town	State	Zip	Work Phone
-----------	-------	-----	------------

**Please check the reasons that apply (you may check more than one):**

- ☐ The amount taken from my bank account was more than I owe. The correct amount of past-due support I owe is \$\_\_\_\_\_. (Please provide any information that supports your claim, such as canceled checks, pay stubs, copy of a court judgment on past-due support, etc.)
- ☐ Some or all of the funds levied are exempt because they come from federal or state benefits, such as Supplemental Security Income (SSI); Transitional Assistance to Families with Dependent Children (TAFDC); Transitional Aid to Needy Families (TANF); or Emergency Aid for Elderly and Disabled Residents and Children (EAEDC). **(You must attach a copy of the official federal or state award letter.)**
- ☐ The funds taken should be exempt from levy because the funds do not belong to you or because of other reasons stated below. (For example, if you are the court appointed conservator or guardian for funds belonging to another individual. Joint account holders, like husband and wife, or child and parent, or parent and significant other, are *not* exempted under this section.) Explain your claim below. **You must provide your three most recent bank statements and all of the associated canceled checks, as well as identify the source of all deposits.** Please attach any additional paperwork you may have to show that the levied funds do not belong to you such as conservator papers or payroll stubs showing direct deposit.
- ☐ The levy of my account causes me a severe hardship for the reason stated below. (Please attach copies of the documents that support your claim such as an eviction notice, notice of foreclosure and/or utility shut off notices.)

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

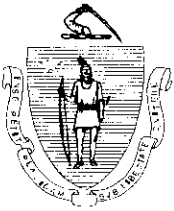
\_\_\_\_\_

\_\_\_\_\_

**PLEASE TURN PAGE**

CSO: 09





***The Commonwealth of Massachusetts***  
***Department of Revenue***  
***Child Support Enforcement Division***

ALAN LEBOVIDGE  
COMMISSIONER  
MARILYN RAY SMITH  
DEPUTY COMMISSIONER

02/13/2005

MARK K. CIMINI  
12 MAPLE ROAD  
WESTFORD, MA 01886-1631

PIN: 00.2129.0173

Case #: 003.908.617

Dear MARK K. CIMINI:

The Child Support Enforcement Division of the Massachusetts Department of Revenue (DOR) is responsible for establishing and enforcing child support orders. Enclosed, please find copies of documents relating to your child support case. DOR is sending you copies of these documents for your records.

If you have any questions about the documents, please call our Customer Service Bureau at the number below.

Sincerely,

MASSACHUSETTS DEPARTMENT OF REVENUE  
CHILD SUPPORT ENFORCEMENT DIVISION

DOR/CSE CUSTOMER SERVICE  
(800)332-2733

CSO: 06



**The Commonwealth of Massachusetts**  
**Department of Revenue**  
**Child Support Enforcement Division**

ALAN LEBOVIDGE  
 COMMISSIONER  
 MARILYN RAY SMITH  
 DEPUTY COMMISSIONER

**NOTICE OF LEVY**

**RETURN WITH PAYMENT** Levy #: 05-11392  
 (Massachusetts General Laws, Chapter 119A, § 6).

MILESTONE FEDERAL CREDIT UNION  
 8 NEW ENGLAND EXECUTIVE PARK  
 BURLINGTON, MA 01803-

**MULTI-STATE LEVY**

**Individual's Name and Address**

MARK K. CIMINI  
 12 MAPLE ROAD  
 WESTFORD, MA 01886-1631

PIN: 00.2129.0173  
 SSN: 010-54-1623

**ACCOUNT NUMBERS**

1. 15571100	5.	9.	Total Amount Due
2.	6.	10.	\$6,610.00
3.	7.	11.	
4.	8.	12.	


Chapter 119A, § 6 (b)(1) of the Massachusetts General Laws provides a lien for the above child support debts. Notice and demand have been made on the individual for the total amount due set forth above, but he or she has refused or neglected to pay. The amount is currently due, owing and unpaid.

You are hereby notified that all property or rights to property, monies and credits belonging to the individual whose name or SSN appears above, or for which you are obligated to the individual, and currently in your possession, is levied upon for payment of the child support debts. Demand is hereby made for the immediate payment of the amount set forth above, or for such lesser amount, from the property, monies and credits levied upon and currently in your possession associated with the individual or SSN. You are directed to immediately freeze such property, monies and credits. You may hold them for a period of up to 21 days after which you are directed to make payment to the Massachusetts Department of Revenue (DOR) at the address below (unless otherwise instructed by DOR). An organization that holds property with respect to a life insurance or endowment contract shall remit payment within 90 days of the date of the levy. G.L. c. 119A, § 6 (b)(6).

This levy will remain in effect for 60 days from the date of receipt or until the amount due is paid in full to DOR, whichever occurs first.

PLEASE NOTE: THIS LEVY ALSO ATTACHES TO ANY OTHER ACCOUNT HELD BY THE INDIVIDUAL IN YOUR INSTITUTION INCLUDING ANY INDIVIDUAL RETIREMENT ACCOUNT (IRA), RETIREMENT PLAN BENEFITING SELF-EMPLOYED INDIVIDUALS, OR ANY OTHER QUALIFIED PLAN IN YOUR POSSESSION OR CONTROL; OR ANY ASSET SUCH AS A LIFE INSURANCE OR ENDOWMENT CONTRACT.

Any person who fails or refuses to surrender property subject to this levy shall be liable to the Commonwealth in his own person in a sum equal to the value of the property not so surrendered, together with costs and interest up to the maximum annual rate established by G.L.c.62C, § 32. Failure or refusal to surrender such property without reasonable cause shall further subject such person to a penalty equal to 25% of the amount recoverable. G.L. c. 119A, §6 (b)(7).

MARILYN RAY SMITH DEPUTY COMMISSIONER OF CHILD SUPPORT Name and Title of Authorized DOR/CSE Staff	Signature 	02/13/2005 Date
---	---	--------------------

**PAYMENT OF LEVY**

Please complete this form and send it along with any payments resulting from this levy, to the address below. Make all payments to the Commonwealth of Massachusetts.

Individual's Name MARK K. CIMINI	SSN 010-54-1623	Amount \$
Signature	Bank	Date

**SEND TO:** DEPARTMENT OF REVENUE  
 PO BOX 55149  
 BOSTON, MA 02205-5149

**MASSACHUSETTS DEPARTMENT OF REVENUE  
CHILD SUPPORT ENFORCEMENT DIVISION**

**BANK LEVY RESPONSE FORM**

**Your bank account has been levied by the Child Support Enforcement Division of the Department of Revenue (DOR) to collect past-due child support.** The levy requires your bank to take money from your account, up to the amount of past-due child support you owe, and send it to DOR. DOR is authorized to levy your account, even if your account is a joint account or if you have been making regular child support payments. **An earlier notice and demand for payment were mailed to you. If you dispute DOR's action for any of the reasons listed below, please complete and return this form to request that DOR review your case.**

***DOR cannot review your case or discuss the review over the telephone.*** Return this form to DOR at the address on the reverse side **within 15 days** from the date of the levy notice.

**Please DO NOT contact DOR's DOR/CSE CUSTOMER SERVICE at (800)332-2733 to request a hardship review, just complete and return the form below.**

NAME:	<hr/>			<hr/>
	Last	First	MI	Social Security Number
ADDRESS:	<hr/>			<hr/>
	Street			Home Phone
	<hr/>			<hr/>
	City/Town	State	Zip	Work Phone

**Please check the reasons that apply (you may check more than one):**

- ☐ The amount taken from my bank account was more than I owe. The correct amount of past-due support I owe is \$\_\_\_\_\_. (Please provide any information that supports your claim, such as canceled checks, pay stubs, copy of a court judgment on past-due support, etc.)
- ☐ Some or all of the funds levied are exempt because they come from federal or state benefits, such as Supplemental Security Income (SSI); Transitional Assistance to Families with Dependent Children (TAFDC); Transitional Aid to Needy Families (TANF); or Emergency Aid for Elderly and Disabled Residents and Children (EAEDC). **(You must attach a copy of the official federal or state award letter.)**
- ☐ The funds taken should be exempt from levy because the funds do not belong to you or because of other reasons stated below. (For example, if you are the court appointed conservator or guardian for funds belonging to another individual. Joint account holders, like husband and wife, or child and parent, or parent and significant other, are *not* exempted under this section.) Explain your claim below. **You must provide your three most recent bank statements and all of the associated canceled checks, as well as identify the source of all deposits.** Please attach any additional paperwork you may have to show that the levied funds do not belong to you such as conservator papers or payroll stubs showing direct deposit.
- ☐ The levy of my account causes me a severe hardship for the reason stated below. (Please attach copies of the documents that support your claim such as an eviction notice, notice of foreclosure and/or utility shut off notices.)

**Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLEASE TURN PAGE**

CSO: 09



***The Commonwealth of Massachusetts***  
***Department of Revenue***  
***Child Support Enforcement Division***

ALAN LEBOVIDGE  
COMMISSIONER  
MARILYN RAY SMITH  
DEPUTY COMMISSIONER

MARK K. CIMINI  
12 MAPLE ROAD  
WESTFORD, MA 01886-1631

02/13/2005

PIN:00.2129.0173

Dear Noncustodial Parent:

In accordance with the Uniform Interstate Family Support Act (UIFSA), you are obligated to pay child support to the Child Support Enforcement Division of the Massachusetts Department of Revenue (DOR), by deduction from your paycheck. Enclosed is a copy of a notice of income withholding that DOR sent to your employer.

Your employer will deduct from each paycheck the amount of child support that you owe and will mail the amount deducted to DOR. DOR will then forward the child support to the custodial parent or to the Massachusetts Department of Transitional Assistance if your family receives public assistance.

**The only defense to the income withholding order is that you do not owe current or past-due child support.** If you dispute that you owe child support, you must provide evidence to support your claim, such as a revised court order, cancelled checks or evidence that your child is no longer entitled to support. Please mail all documentation to the address below.

If you are no longer employed by the company named on the enclosed form, please call the number below to inform DOR of your new employer.

Thank you for your cooperation in ensuring that your children receive child support on time and in full.

MASSACHUSETTS DEPARTMENT OF REVENUE  
CHILD SUPPORT ENFORCEMENT DIVISION  
DOR/CSE CUSTOMER SERVICE  
PO BOX 7057  
BOSTON, MA 02204-0000

**DOR/CSE CUSTOMER SERVICE**

**(800)332-2733**

CSO: 06

**ORDER/NOTICE TO WITHHOLD INCOME FOR CHILD SUPPORT**

State	<u>MASSACHUSETTS</u>	<u>X</u>	Original Order/Notice
Co./City/Dist. of	<u>MASSACHUSETTS</u>		Amended Order/Notice
Date of Order/Notice	<u>02/13/2005</u>		Terminate Order/Notice
Court/Case Number	<u>003.908.617</u>		

050425792	)	RF:	<u>CIMINI MARK K</u>
Employer/Withholder's Federal EIN Number	)	Employee/Obligor's Name (Last, First, MI)	<u>010-54-1623</u>
TEXTRON SYSTEMS	)	Employee/Obligor's Social Security Number	<u>003.908.617</u>
Employer/Withholder's Name	)	Employee/Obligor's Case Identifier	<u>CIMINI MARGARET R</u>
ATTN: IRIS JAMES	)	Custodial Parent's Name (Last, First, MI)	
201 LOWELL ST	)		
WILMINGTON, MA 01887-0000	)		
Employer/Withholder's Address	)		

**Child(ren)'s Name(s):**  
**CIMINI JONATHAN F**

**Child(ren)'s DOB(s):**  
**04/05/1993**

**ORDER INFORMATION:** This is an Order/Notice to Withhold Income for Child Support based upon an order for support from MASSACHUSETTS. By law, you are required to deduct these amounts from the above-named employee's/obligor's income until further notice, even if the Order/Notice is not issued by your State.

[X] If checked, you are required to enroll the child(ren) identified above in any health insurance coverage available through the employee's/obligor's employment.

\$ 365.00 to be paid WEEKLY in current support

\$ 91.25 to be paid WEEKLY in past-due support

Arrears 12 weeks or greater? ☐ yes ☐ no

\$ 0.00 to be paid in medical support

\$ 0.00 to be paid

\$ 0.00 to be paid for a total of

\$ 456.25 to be paid WEEKLY to be forwarded to the payee below.

You do not have to vary your pay cycle to be in compliance with the support order. If your pay cycle does not match the ordered support payment cycle, use the following to determine how much to withhold:

\$ 456.25 per weekly pay period. \$ 987.78 per semimonthly pay period (twice a month).

\$ 912.50 per biweekly pay period (every two weeks). \$ 1,975.56 per monthly pay period.

**REMITTANCE INFORMATION:**

You must begin withholding no later than the first pay period occurring 3 working days after the date of this Order/Notice. Send payment within 3 working days of the paydate/date of withholding. You are entitled to deduct a fee to defray the cost of withholding. Refer to the laws governing the work state of the employee for the allowable amount. The total withheld amount, including your fee, cannot exceed 65 % of the employee's/obligor's aggregate disposable weekly earnings. For the purpose of the limitation on withholding, the following information is needed (see #9 on back).

When remitting payment provide the paydate/date of withholding and the case identifier 003.908.617

If remitting by EFT/EDI, use this FIPS code: \*

Bank routing code: \*

Bank account number: \*

Make it payable to: COMMONWEALTH OF MASSACHUSETTS

Send check to: MASSACHUSETTS DEPARTMENT OF REVENUE

CHILD SUPPORT ENFORCEMENT DIVISION

PO BOX 55140

BOSTON, MA 02205-5140

Authorized by



Print Name MARILYN RAY SMITH

Title DEPUTY COMMISSIONER